

March 31, 1998

**AVAILABILITY OF MEDICAL AND SURGICAL SUPPLY PRODUCTS
FOR SPINAL CORD INJURY PATIENTS**

1. PURPOSE: This directive provides guidance regarding the availability of Medical and Surgical Supply Products for spinal cord injury patients at Department of Veterans Affairs (VA) medical centers.

2. BACKGROUND

a. In May 1997, VA implemented a national formulary that contains a section dedicated to outpatient medical and surgical products.

b. The medical and surgical products listed in the national formulary are intended to provide each Veterans Integrated Service Network (VISN) and local facility direction in the selection of the formulary items that must be available at all facilities for the care of veterans. This is a generic listing of the broad range of products that must be available.

b. The medical and surgical portion of the formulary is not intended to be exclusionary or to preclude a patient from receiving a particular product deemed medically necessary by the provider. It is recognized that, for some of these products, patient specific needs require use of a particular brand for which an alternative may not be medically acceptable. It is acknowledged that a number of patients have used a particular medical and surgical product for years, and it is anticipated that availability of the product will be necessary to the vast majority of these patients. Before any change in product is considered, both clinical and customer acceptance issues must be addressed.

c. VISN and local formularies and practices are expected to include the needed specificity of product to achieve the intent of this directive.

3. POLICY: VA policy ensures that the unique needs of spinal cord injury patients will be addressed within the parameters of the national formulary.

4. ACTION

a. VISN and local formulary committees will review the medical and surgical product section of the national formulary to assure availability of product.

b. Local formulary committees will review the unique product requirements of spinal cord injury patients to assure that patient needs are consistently met. Care providers at the local level must review any suggested changes in the source of medical and surgical products.

c. The non-formulary process can be used if necessary to address unique patient needs.

5. REFERENCES: None

THIS VHA DIRECTIVE EXPIRES MARCH 31, 2003

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6. FOLLOW-UP RESPONSIBILITY: Chief Consultants for Spinal Cord Injury (11S) and Pharmacy Benefits Management (119) are responsible for the contents of this directive.

7. RESCISSIONS: This VHA Directive expires March 31, 2003.

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